

ALTON URBAN DISTRICT COUNCIL



ANNUAL REPORT

of the

Medical Officer of Health

and

Chief Public Health Inspector

for the year

1957

ALTON URBAN DISTRICT COUNCIL



Chairman of Council

Councillor W. H. Shipley

Vice-Chairman of Council

Councillor Brigadier E. W. Rogers, C.I.E.

Public Health Committee

Chairman

Councillor F. C. Jenner

Members as at 31/12/57

Councillor A. N. Bissett

Councillor Sir John Le Rougetel,

„ R. A. Carr

K.C.M.G., M.C.

„ E. T. Hutley

„ Brigadier E. W.

„ Mrs. C. Kerridge

Rogers, C.I.E.

„ W. H. Shipley

Representatives on the Alton Joint Slaughterhouse Committee :

Councillors Carr, (Mrs.) Kerridge, Jenner and Stickland

Representatives on the Alton (No.7)

District Health Sub-Committee

Councillors Mrs. C. Harckham and Mrs. C. Kerridge

Staff

Medical Officer of Health :

J. Coutts Milne, M.B., Ch.B.,
D.P.H., D.T.M.&H.

Chief Public Health Inspector

and Meat and Food Inspector :

D. M. Ling, C.S.I.B., M.R.S.H.,
M.A.P.H.I.

Clerk :

M. G. Worthington

ALTON URBAN DISTRICT COUNCIL.
COUNCIL OFFICES,
HIGH STREET, ALTON.

**ANNUAL REPORT OF THE MEDICAL OFFICER OF
HEALTH FOR THE YEAR ENDED 31st DECEMBER, 1957.**

Introduction.

Mr. Chairman, Madam and Gentlemen,

I have the honour to present for your information and consideration the Annual Report for the year 1957, compiled according to the directions of the Minister of Health.

The vital statistical figures continue to be satisfactory. The birth rate is higher than in the previous year and although the death rate is a little higher than in 1956 it remains the same as the average rate for the previous five years. The infant mortality rate is well below the rate for the previous year, as well as being below the average for the last five years. The relatively small numbers involved subject these calculated rates to wide variation and a better comparison is obtained by taking the average rates during the two quinquennial post war periods. In the early autumn the town experienced its share of the well nigh world wide influenza epidemic.

I am grateful to the Chairman and Members of the Public Health Committee for their encouragement and help to Mr. Godsell, Clerk of the Council, to Mr. Ling, Chief Public Health Inspector and Mr. Worthington for their ready assistance enabling me to carry out my duties.

I have the honour to be,

Your obedient Servant,

J. COUTTS MILNE,

Medical Officer of Health.

To the Chairman and Members
of Alton Urban District Council.

Part 1

General Report of the Medical Officer of Health

1 The population of the town as estimated by the Registrar General for mid 1957 is 8740. This shows an increase of 50 over the 1956 figure. The natural increase of births over deaths amounted to 63.

2 Birth and Death Rate.

During the year there were 163 live births representing a birth rate of 18.6 per 1000 of the population compared with an average of 15.7 per 1000 for the previous quinquennium 1952-56 and of 17.6 for the quinquennium 1947-51. The comparability factor given by the Registrar General which when applied to the local rate gives a figure which can be compared with the rates for other areas is 1.01 for births, giving an adjusted rate 18.8 which compares with the rate of 16.1 (provisional) for England and Wales.

The 100 deaths represent a crude death rate of 11.4 per 1000 of the population compared with an average of 11.4 for the previous quinquennium 1952-56 and of 13.6 for the quinquennium 1947-51. The comparability factor is 0.97 and this gives an adjusted rate of 11.1 which compares with that of 11.5 for England and Wales.

3 Infant Mortality Rate.

There were two deaths in children under one year and both occurred during the first 4 weeks of life. The infant mortality rate is 12.3 per 1000 related births compared with an average of 17.3 for the previous quinquennium 1952-56 and of 34.3 for the quinquennium 1947-51, and with a rate of 23.0 for England and Wales, again the lowest ever recorded for the country. The small numbers involved, however, render rate comparisons with other areas or earlier years misleading. There were 3 still births recorded, giving a still birth rate of 18.1 per 1000 live and still births (England and Wales 22.4).

4 Causes of Death.

The commonest cause of death was diseases of the heart and blood vessels (34) followed by cancer of various types (23).

Six of the cancer deaths were due to cancer of the lungs. 2 male and 4 female. These figures are small and not apparently significant but those for the country as a whole continue to give rise for concern. In England and Wales in 1957, 94007 deaths were recorded from cancer of various types compared with 77,516 ten years earlier, about one fifth (19,118) of the deaths in 1957 were due to lung cancer, 16430 being males and 2688 females, a ratio of 6 to 1, or expressed in other terms about 33% of male deaths from cancer were certified as due to cancer of the lung, and for women only 6% were ascribed to this cause. In June 1957 the

Ministry of Health circularised all Local Authorities in England drawing attention to the special report of the Medical Research Council on the subject of smoking and cancer of the lung in which they concluded that the most reasonable interpretation of the very great increase in deaths from lung cancer in males during the past 25 years is that a major part of it is caused by smoking tobacco, particularly heavy cigarette smoking, adding that it is the Government's intention that this opinion should be brought effectively to public notice so that everyone may know the risks involved in smoking, and the individual who smokes can then make up his or her own mind. Criticism of the Medical Research Council opinion has been made by the Tobacco Manufacturers Standing Committee mainly because the evidence in the matter has been obtained by observations rather than from controlled Human experiments and is not supported by laboratory proof. But a Medical Officer of Health has to be empirical and cannot wait for scientific proof of the causation of a disease which he regards as a danger to health, hence my continued harping on a subject which smokers may feel better left alone.

Coronary heart disease accounted for 14 deaths, 13 male and 1 female. Much research has been carried out in recent years into the causation of this disease which is becoming increasingly important as a major cause of death in middle aged men. One view which has gained considerable support is that a diet rich in animal fat is responsible for an increase of a substance called cholesterol in the blood stream, and this in turn causes the arteries to harden and thicken and leads to coronary disease of the heart. Other authorities consider that the evidence does not support the theory of a single or major dietary cause of coronary disease. A more acceptable suggestion is that relative over consumption of food associated with reduced physical exercise may be one of several causes of the disease. The advice given in a leading article in the British Medical Journal is worth noting—that is—"to eat in moderation and avoid getting overweight, and that until we have more precise information on the relationship between diet and coronary disease there is no need for the middle aged man to forgo his breakfast of eggs and bacon in favour of cereal and skim milk".

5 Infectious Diseases.

(a) General.

Following the particularly low incidence of infectious disease in 1956 there was a not unexpected increase in 1957, 67 cases in all, compared with 30 the previous year, mainly accounted for by an increase in the number of cases of measles. The total figure however is still well below the average for the previous five years.

(b) Measles.

48 cases were notified—most of them in the second quarter of

the year, compared with 11 in 1956. All except 2 were under 10 years of age and 4 were less than one year old.

(c) Whooping Cough.

8 cases were reported—6 being girls. curiously enough the 3 cases the previous year were also girls. Only 1 child was under one year of age.

(d) Food Poisoning.

One case was notified, of a school boy, the causal organism being *Salmonella Typhi-Murium*. None of the other members of the household gave any evidence of infection and the origin of the infection could not be traced. *Salmonella* infection is the outstanding cause of food poisoning in this country. According to the report of the Chief Medical Officer to the Ministry of Health for 1956, when 18,500 cases of food poisoning came to notice, of food poisoning incidents due to known causes *Salmonella* constituted 44% of general outbreaks, 94% of family outbreaks and 99% of sporadic cases. Animal sources are the main reservoirs of *salmonella* infection. Egg products, especially duck eggs, frequently contain *salmonella*. The vehicle of infection is often processed and made up meats, which are dangerous because of the time which elapses between the preparation and consumption of the food. Made up meat dishes and other vulnerable foods e.g. meat pies, stews, trifles, custards can act as ideal breeding grounds for any dangerous germs that gain access, and if kept at a warm temperature the germs multiply rapidly. This, however, can be prevented if the food, after being cooked, is rapidly cooled and then placed in a refrigerator until required, instead of being left at room temperature and eaten cold or warmed up the next day.

(e) Influenza.

From April onwards public interest, and at times apprehension, was focussed on the onward march of a Far Eastern influenza epidemic, characterised by great infectivity and relative mildness, first reported from Hong Kong and Singapore and soon to be known as "Asian Flu", eventually spreading to all the continents. Influenza is not a notifiable disease and my knowledge as to the amount of the disease in the town depended on information from schools, and from the Ministry of Pensions and National Insurance office which notified me when the sickness benefit and claims increased by 30% over the figures for the previous week or were double the average weekly figure for the period April 4th to December 4th 1956. School children and middle aged adults seemed to be particularly affected. A preventive vaccine was made available to medical and nursing staff.

(f) Poliomyelitis.

No case of poliomyelitis has been reported in the town for the past 2 years. The poliomyelitis vaccination campaign introduced

in 1956 was continued. Those children who were originally registered before 31st March, 1956, but not selected for vaccination in that year, were vaccinated towards the latter part of 1957 either by their own family doctor or by me in my capacity as Assistant County Medical Officer. By the end of the year 85 children had been vaccinated. In May, registration was accepted for children in the following age groups :—(1) those born in 1955, (2) those born in 1956, (3) those born in the years 1947 to 1954 who had not been registered before, and priority was to be given to the children born in 1955 and 1956 who were registered before 22nd July, 1957. In December the scheme was extended to cover the following groups :—(1) children born in the years 1943 to 1957, (2) expectant mothers. This extension was made possible by the Government importing supplies of American and Canadian Salk vaccine for use together with the British vaccine. The imported vaccine is receiving the same stringent tests in this country as the British vaccine receives and is passed as satisfactory for use. This additional vaccine has provided an opportunity of giving earlier protection than would otherwise be possible to children who might contract the disease. So that by the summer of 1958 it is hoped to offer vaccination to all children under 15 years of age and to expectant mothers.

(g) Tuberculosis.

Only two cases of pulmonary tuberculosis were notified during the year—both adults, one male and one female, as compared with 7 cases the previous year. No case of non-pulmonary tuberculosis was reported.

		Pulmonary	
Age group		M	F
25—44..	..	—	1
45—64..	..	1	—
Total	..	1	1

(h) Various.

Of other diseases 2 cases of scarlet Fever, 6 of pneumonia, 2 of erysipelas and 1 of sonne dysentery were notified.

6 Prophylactic Immunisation Schemes.

These continue to be of ever increasing importance, their need not being lessened by the absence or reduction in incidence of the disease concerned. Diphtheria is the classic example of a disease almost banished by immunisation, in 1957 there were only 201 cases in the whole country—almost a twenty fold reduction from 1948. In this town no case has occurred for the past 10 years. In order to eradicate the disease it is considered necessary to secure the immunisation of not less than 75% of babies before their first

birthday. In 1957 45% of babies in the town were immunised before their first birthday.

Multiple immunisation has been gradually coming into more general use. In 1955 a combined scheme of diphtheria and whooping cough immunisation was started in the county, and in 1956 provision was made by the County Council for the use of a triple antigen to protect against diphtheria, whooping cough and tetanus, and it is unfortunate that the Central Health Services Council has had to advise that antigens should in general preferably be used separately in view of the Medical Research Council's reports on neurological lesions in relation to innoculation.

The number of children protected is shown in the following table:—

Ages	Diph. only		Diph.&W/cgh		W/cgh. only		Triple	
	Primary	Booster	Primary	Booster	Primary	Booster	Primary	Booster
Under 1	—	—	62	—	—	—	12	—
1—4	1	—	14	1	5	—	2	—
5—14	16	34	3	2	4	—	1	—
Total	17	34	79	3	9	—	15	—

To assess the extent to which children in the town have been protected the proportion of children of each age who have received at some time or another a course of injections against diphtheria as well as the ages at which the course was received must be taken into consideration. Therefore the immunisation state is shown in the following table by (a) age at innoculation and (b) age attained :—

Number of children at 31/12/57 who had completed a course of immunisation at any time between 1/1/43 and 31/12/57.

Age at 31.12.57. i.e. born in year	Under 1 1957	1—4 1952—56	5—9 1948—52	10—14 1943—47	Total under 15 years
Last complete course of inject- ions 1953-57	17	358	489	460	1324
1952 or earlier	—	—	169	249	418

7 Vaccination.

Vaccination is a County Council responsibility but the vaccination state of the community is a matter of concern to all. The figures for the year are shown in the following table :—

Age at which vaccinated	Primary Vaccinations	Revaccinations
Under 1 year	74	—
1—4 years	5	2
5—14 years	2	8
15 years and over	3	32
Total	84	42

74 Babies under 12 months of age were vaccinated and the number of live births during the year were 163 so that the equivalent of 45% of the children born were vaccinated. This rate is the lowest, both among the Urban and Rural districts, in the county. The county rate in 1957 being 68.5% whilst the rate for England and Wales for 1956 was 38.4%. The acceptance rate for infant vaccination varies enormously in different parts of the country, from 8.7% in Rutland to 66.5% in East Sussex, and 74.9% in the County Borough of Canterbury. Although the country has been free from smallpox for some 3 to 4 years past, a recent outbreak in Cheshire has shown that the danger still remains of smallpox infection being imported from abroad and that the general immunity against the disease is not sufficient to prevent cases occurring in this country. The rush to be vaccinated when a case occurs shows that the public still believe in the efficacy of vaccination, and it is unfortunate that many parents do not show such faith when their children are young as vaccination is best performed when babies are under one year old. The optimum period for vaccination is regarded as at 3 months of age.

8 National Assistance Act, 1948.

No action was required under Section 47 of the Act regarding the removal to suitable premises of persons in need of care and attention.

9 Caravans.

Caravans nowadays present a problem for most local authorities to a greater or lesser extent. It has been estimated that the caravan population in the country now approaches a quarter of a million and is being added to annually by some 33,000, not decreasing as had been hoped in some quarters with the gradual overcoming of the housing shortage. This form of mobile living seems to have become a feature of modern life in this country.

The problem is a relatively minor one in the town. There are no licensed caravan sites, only individual caravans. During the year there were 7 caravans stationed in outlying parts of the town and of these, 3 were licensed. In addition, six persons applied to station caravans in the town but for various reasons did not take up residence. These numbers lend support to the Council's view that there is no need at the present time for the provision of a caravan site by the Council.

Whether caravans are an amenity or a menace depends, I think, on the viewpoint of the individual interested. They undoubtedly meet a need but they also need to be controlled. There has been a demand in some quarters for further legislation to give greater powers to local authorities to deal with caravans used as permanent housing, particularly to lay down standards for overcrowding. Some play has been made in recent correspondence in the local press on the terms used by the Planning Authority in refusing approval to caravans. "Sub-standard housing" and "detrimental to the amenities of the locality". "How can", they say, "a proprietary caravan equipped with all modern devices be called sub-standard", but it is not the caravan that is sub-standard as such but when compared with a house. It is when one sees a family of 5 young children living in a caravan that one realises how inadequate such accommodation is for a young growing family.

10 PROVISIONS OF GENERAL HEALTH SERVICES FOR THE AREA

Devolution of Health Functions.

On the 1st April, 1953, there came into operation a scheme of devolution of Health functions to existing District Health Sub-Committees. In this area, the No. 7 (Alton District Health Sub-Committee comprises the areas of the Alton Rural District Council and Urban District Council, to which sub-committee both Councils nominate members. Among the resolutions made were—

“In order to make the fullest possible use of local knowledge and to widen interest there be devolved upon the District Health Sub-Committee as far as possible responsibility for the supervision of the Health Services in the area ; in particular services operating under Section 22 (Care of Mothers and Young Children), Section 24 (Health Visiting), Section 26 (Vaccination) and Section 28 (Prevention of illness, care and aftercare, so far as that section does not relate to tuberculosis) of the National Health Service Act, 1946, as amended, provided that those functions are exercised in such a way as to conform with the existing scheme”.

Ambulance Facilities.

The Ambulance Service is conducted by the County Council who supply monthly details of journeys to the Public Health Committee. The ambulances for the area are stationed at Alton.

Applications for the use of ambulances are made to—

The Aldershot Ambulance Station
(Telephone : Aldershot 2244)

Child Welfare.

A Child Welfare Clinic is held every Tuesday afternoon from 2 to 4 p.m. at the Assembly Rooms, Alton. This centre is for the attendance of mother and babies, and children under five. Activities at the clinic, at which a doctor and nurse attend, include advice on feeding and child management, immunisation, weighing and the distribution of welfare foods and certain Medicaments.

Consequent upon the closure of the Ministry of Food office, National Welfare Food Distribution Centres were established as follows—

	Centre	Times of opening
Alton	W.V.S. Office, 25 High Street	Tuesday & Friday 10-12 & 2-4
	Child Welfare Centre, Assembly Rooms	Tuesday 2-4
Holybourne	Taylor's Stores	Shop hours

Health Visiting.

The Health Visitor for Alton is Mrs. J. E. Morrow, 13 White-down, Alton.

Home Help Service.

A scheme of domestic help is available. The helpers are experienced women carefully chosen for their suitability for the work. They will run the home carefully, their job being to take over the housewife's work.

Home Helps are available for the following types of cases—when the housewife is sick or has to have an operation ; when a new baby is expected; when several members of a household are ill at one time ; and to give help to the elderly and infirm.

Application for a Home Help, accompanied by a medical certificate, should be made to the District Organiser. The charge depends on the hours worked and the income of the family after certain allowances have been made.

Division VI includes the Urban District of Alton and the Divisional Organiser now has her office at the Town Hall, Petersfield (Telephone: Petersfield 771/773), to whom application should be made for a Home Help.

Laboratory Facilities.

Bacteriological examinations of clinical matter (sputum, swabs, etc.) and water, milk and foodstuffs are carried out at the Public Health Laboratory at the Royal Hampshire County Hospital, Winchester.

Chemical analyses of water, sewage, milk and other samples are carried out by arrangement with the Public Analyst, Southampton.

Thanks are expressed to the Director of the Public Health Laboratory Service and the Public Analyst, Southampton, for their ready advice and assistance granted during the year.

Midwifery and Home Nursing.

These services are administered as follows—

DISTRICT SERVED	NURSE	SERVICE GIVEN
Alton	Mrs. M. A. Staples, S.R.N., S.C.M., GAS/AIR, 6 Edward Road, Alton	Midwifery and general Nursing

QUALIFICATIONS: S.R.N. State Registered Nurse; S.C.M. State Certified Midwife ; Gas/Air, Gas and Air Analgesia Certificate.

Ante-Natal Clinics.

A Clinic is held every Thursday at 2 p.m: at Alton General Hospital.

The Medical Officers attending the Alton Clinics at the end of the year—

1st Thursday	Dr. W. S. Larcombe and Dr. P. Shortt (at 2.30)
2nd Thursday	Dr. T. C. Wilson
3rd Thursday	Dr. H. E. Larcombe
4th Thursday	Mr. A. F. Goode

School Health Services.

Clinics are held as follows—

Orthopaedic	Lord Mayor Treloar Hospital, Alton
Ear, nose and throat	Alton General Hospital
Dental	At Schools
Ophthalmic and orthoptic	Alton General Hospital
Child guidance	Health Centre, Winchester
Speech therapy	Alton General Hospital

Tuberculosis.

Clinics are held at Aldershot, Basingstoke and Winchester, whilst sanatoria are available at Bishopstoke, Chandler's Ford, Liphook and Alton (Morland Hall [The Henry Gauvain Hospital] and Lord Mayor Treloar Hospital).

Venereal Diseases.

Clinics are held at Aldershot and Winchester.

Area Welfare Officer.

The Area Welfare Officer is Mr. C. Hemsley, whose office is at Manor Park House, Aldershot (Telephone : Aldershot 2341). His assistant is Mr. P. H. Dean, County Council Health Centre, Brambllys Grange, Basingstoke (Telephone : Basingstoke 934).

Water Supply. Sewerage, Sewage Disposal and Public Cleansing.

I am indebted to the Council's Engineer and Surveyor, (Mr. F. T. Cornhill, M.I.Mun.E., M.R.S.H.) for the following report—

Water Supply.

The water derived from the well at Windmill Hill continued to be of a high standard of purity throughout the year, and regular samples were taken both for bacteriological and chemical analyses, which proved this to be so. The average daily consumption of water throughout the year amounted to 472,402 gallons, which is again slightly less than the average for 1956, this is again accounted for by the fact that increased leak detection and repair work has been executed. No new mains were laid during the year.

Sewerage and Sewage Disposal.

The quantity of sewage pumped during the year amounted to 219,436,000 gallons. This was pumped to the Sewage Disposal Works for purification. It was necessary to re-phase the system of the re-circulation at the works owing to a poor effluent from one of the filters, and this had the effect of improving the final

effluent for discharge into the Caker Stream. The Thames Conservancy Inspectors continued their activities during the year and took samples.

Public Cleansing.

The regular collection of house and trade refuse has continued. The Control Tip at Anstey Mill Lane was used throughout the year for the disposal of all refuse, and it was possible to exercise a greater control as more supplies of covering material were available, and a regular system of completely covering the tip twice a week was instituted. This had the effect of making easier rodent and fly control.

Part II (Medical Statistics)

Table 1—General Statistics.

Area in Acres	...	...	...	...	4085
Rateable Value	...	...	...	...	£101,950
Sum represented by a penny rate	...	...	...	...	£441
Population	...	...	...	...	8740
Number of inhabited houses	..	...	...	...	2796

Table 2—Live Births.

			Male	Female	Total
Legitimate	...	...	84	69	153
Illegitimate	...	...	2	8	10
			—	—	—
		Total	86	77	163
			—	—	—
Live birth rate per 1000 of estimated population					... 18.6
Live birth rate per 1000 estimated population,					
England and Wales					... 16.1

Table 3—Still Births.

			Male	Female	Total
Legitimate	...	...	1	2	3
Illegitimate	...	...	0	0	0
			—	—	—
	Total		1	2	3
			—	—	—

Table 4—Deaths (from all causes).

	Male	Female	Total	
	56	44	100	
Death rate per 1000 estimated population	...	...		11.4
Death rate per 1000 estimated population, England				
and Wales	...	...	...	11.5

Table 5—Infant Mortality (details of infants under one year of age)

			Male	Female	Total
Legitimate	...	...	1	1	2
Illegitimate	...	...	0	0	0
Total			1	1	2
Infant mortality per 1000 live births					12.3
Infant mortality per 1000 live births, England & Wales					23.0

Table 6—Neo-Natal Mortality.

	Male	Female	Total
Deaths of infants under 4 weeks of age	1	1	2

Causes of Death.

	Diseases	Male	Female	Total
1	Tuberculosis, respiratory	0	0	0
2	Tuberculosis, other	0	0	0
3	Syphilitic disease	0	0	0
4	Diphtheria	0	0	0
5	Whooping Cough	0	0	0
6	Meningococcal infections	0	0	0
7	Acute poliomyelitis	0	0	0
8	Measles	0	0	0
9	Other infective and parasitic diseases ..	0	1	1
10	Malignant neoplasm, stomach ..	1	0	1
11	„ „ lung and bronchus ..	2	4	6
12	„ „ breast	0	3	3
13	„ „ uterus	0	1	1
14	Other malignant and lymphatic neoplasms	5	7	12
15	Leukaemia and Aleukaemia	1	0	1
16	Diabetes	0	3	3
17	Vascular lesions of nervous system ..	5	3	8
18	Coronary disease, angina	13	1	14
19	Hypertension with heart disease ..	1	1	2
20	Other heart diseases	4	8	12
21	Other circulatory diseases	4	2	6
22	Influenza	2	0	2
23	Pneumonia	5	1	6
24	Bronchitis	2	1	3
25	Other diseases of respiratory system ..	4	0	4
26	Ulcer of stomach and duodenum ..	0	1	1
27	Gastritis, Enteritis and Diarrhoea ..	0	0	0
28	Nephritis and Nephrosis	0	2	2
29	Hyperplasia of Prostate	0	0	0
30	Pregnancy, Childbirth and Abortion ..	0	0	0
31	Congenital malformations	0	0	0
32	Other defined and ill-defined causes ..	2	5	7
33	Motor vehicle accidents	1	1	1
34	All other accidents	1	2	3
35	Suicide	2	0	2
36	Homicide and operations of war ..	0	0	0
All causes		56	44	100

Table 8—Deaths according to ages.

Age group	Males	Females	Total
Under 1 ..	1	1	2
1— 9 ..	1	0	1
10—19 ..	0	0	0
20—29 ..	0	1	1
30—39 ..	1	0	1
40—49 ..	2	2	4
50—59 ..	13	3	16
60—69 ..	6	9	15
70—79 ..	24	18	42
80—89 ..	7	7	14
90—99 ..	1	3	4
	56	44	100

Table 9—Number of Cases of Infectious Diseases notified during the last 4 years

Disease		1954	1955	1956	1957
Scarlet Fever ..	..	10	14	6	2
Whooping Cough ..	..	12	30	3	8
Measles .. ..	..	6	109	11	48
Acute Pneumonia ..	..	9	12	9	7
Food Poisoning ..	..	0	1	0	1
Dysentery ..	..	1	1	0	1
Erysipelas ..	..	1	1	1	2
Totals .. ..	..	39	168	30	69

Table 10—Tuberculosis (details of new cases for the past 4 years)

Pulmonary	{ Male	0	3	5	1
	{ Female	0	4	2	1
Non-Pulmonary	{ Male	0	0	0	0
	{ Female	0	0	1	0
		0	7	8	0

ALTON URBAN DISTRICT COUNCIL

Annual Report of the Public Health Inspector for the year ended 31st December, 1957

Few pieces of legislation have, in recent years received so much attention from supporters and critics alike and from the public at large as the new Rent Act, 1957. The nation's health is dependent upon many contributory factors, some of these are obvious, others are less so and it is on one of these less obvious factors that the Rent Act operates - namely housing. Good housing is vital for good health - both physical and mental. The Rent Act should play its part in full in maintaining the country's housing accommodation in reasonable condition and prevent further deterioration and whilst the Housing Acts deal adequately with sub-standard houses and slum clearance the Rent Act will assist in slum 'prevention'.

Fifteen applications were made to the council for Certificate of Disrepair but only eleven were actually issued, in all the other cases promises were made by the owners to have the necessary works executed. Whilst a few owners served notices to increase the rents irrespective of the condition of the property it is but fair to say that many carried out repairs prior to serving Form A, this brought sympathy from the tenants, who paid the increase without requesting the full repairs of the property, which was their entitlement. During the first few months the Act was in operation advice and information was sought from the Health Department by tenants and owners alike and arrangements were made with local stationers for the stocking of the forms required.

The Tuberculosis (Area Eradication) Order of the Ministry of Agriculture, Fisheries and Food came to fruition on 1st October 1957 when Hampshire was declared an Attested Area for the purposes of bovine tuberculosis. The slaughterhouses were requested to co-operate with the Ministry's Veterinary Surgeons as to the slaughter of 'reactors' and 'contacts' and I was asked to carry out full poste mortem examinations and report the findings to the Animal Health Division of the Ministry.

INSPECTION AND SUPERVISION OF FOOD

Meat.

The slaughterhouses at Kent Lane and Amery Street continued to operate throughout the year but the management changed from Messrs. Cottons (Cadnam) Ltd. who went into voluntary liquidation to Messrs. Wm. Rothwells Ltd. The existing staff were taken over by the new firm and the excellent facilities provided in the past were continued during the year.

Until the change-over period Kent Lane slaughterhouse was in constant use and the Alton R.D.C. Public Health Inspectors assisted with inspection duties at this establishment on alternate weeks. Since April 1957 however, this slaughterhouse has been closed except for isolated occasions.

Carcases Inspected and Condemned

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	804	1226	3274	378	6014
Number Inspected ..	773	1203	3205	378	6010
All diseases except T.B. and cysticerci. Whole car- cases condemned ..	3	37	11	9	30
Carcases of which some part or organ was con- demned	144	117	11	10	197
Percentage of the number inspected infected with disease other than T.B. and cysticerci	19.02	12.72	0.69	5.03	3.78
<u>Tuberculosis only :</u> Whole carcasses condemned	—	31	—	—	—
Carcases of which some part or organ was con- demned	40	37	—	—	61
Percentage of the number inspected infected with T.B.	5.17	5.74	—	—	1.01
<u>Cysticercosis</u> Carcases of which some part or organ was con- demned	—	3	—	—	—
Carcases submitted to treat- ment by refrigeration ..	—	2	—	—	—
Generalized and totally condemned	—	—	—	—	—

Return of Diseases for which whole Carcases were condemned

Disease	Cattle	Cows	Calves	Sheep	Pigs	Total
Abscess	—	—	—	—	4	4
Bruising and Mutilation ..	—	—	—	3	—	3
Emaciation	—	25	—	2	—	27
Erysipelas	—	—	—	—	2	2
Fever	—	—	2	—	1	3
Immaturity	—	—	4	—	—	4
Joint Ill	—	—	2	—	—	2
Mammitis	—	1	—	—	—	1
Moribund condition ..	—	—	1	3	—	4
Oedema	—	8	2	1	5	16
Pyæmia	—	3	—	—	4	7
Septicæmia	3	—	—	—	12	15
Tuberculosis	—	31	—	—	—	31
Uraemia	—	—	—	—	2	2
	3	68	11	9	20	121

Return of Diseases for which organs and part Carcases were condemned

Disease	Cattle	Cows	Calves	Sheep	Pigs	Total
Head :						
Tuberculosis	19	16	—	—	61	96
Actinomycosis	2	1	—	—	—	3
Abscess	4	2	—	—	—	6
Hearts :						
Pericarditis	4	2	9	—	43	58
Erysipelas	—	—	—	—	1	1
Lungs :						
Tuberculosis	31	30	—	—	—	61
Abscess	3	1	—	—	—	4
Pneumonia	—	2	12	3	85	102
Cysts	—	1	—	2	—	3
Stomachs						
Tuberculosis	—	1	—	—	—	1
Foreign Body	1	3	—	—	—	4
Livers :						
Tuberculosis	1	3	—	—	—	4
Cirrhosis	22	10	—	—	81	113
Peritonitis	4	4	11	—	19	38
Cavernous Angioma	—	30	—	—	—	30
Abscess	32	15	—	—	—	47
Lipomata	—	1	—	—	—	1
Echinococcus	1	1	—	—	2	4
Strongyli	—	—	—	2	—	2
Distomatosis	65	57	—	—	—	122
Fatty degeneration	5	3	1	—	—	9
Kidneys						
Erysipelas	—	—	—	—	3	3
Tuberculosis	—	2	—	—	—	2
Nephritis	—	2	—	27	—	29
Spleen :						
Tuberculosis	—	1	—	—	1	2
Part Carcases :						
Erysipelas	—	—	—	—	4	4
Tuberculosis	—	2	—	—	—	2
Fracture	—	—	—	—	1	1
Fever	4	—	—	2	3	9
Arthritis	—	—	—	—	—	—
Pleurisy	1	1	—	—	1	3
Peritonitis	—	1	—	—	2	3
Abscess	3	—	—	2	5	10
Urticaria	—	—	—	—	2	2

The general standard of food animals admitted to the slaughterhouse is good but during the year a cattle dealer/meat wholesaler from outside the area used the facilities of the slaughterhouse to supply Smithfield Market. Some of the cows which he brought in were not up to the standard usually dealt with in Alton and consequently the figures for condemnations, particularly for tuberculosis and emaciation, are higher than normal.

It is also worthy of note that of the offal condemned, over one half of the weight refers to liver, and over 50% of the liver condemned was affected by distomatosis or liver flukes. This is a condition which renders the liver tough, 'pipey' and unsaleable and farmers should be urged to use the excellent modern treatment to eradicate this parasite from their pastures and so prevent this wholesale wastage of the highest priced and greatly demanded offal.

The total weight of meat and offal condemned as unfit for human consumption amounted to 24tons 14cwts. 62lbs.

Chicken.

During the year 23190 chicken were slaughtered at the Chicken Slaughterhouse and it was found necessary to condemn 431 as unfit for human consumption. The offals and other refuse from these premises have created no public health problem.

Food Condemned other than at the Slaughterhouse

Meat lbs. ozs.		Canned Meat lbs. ozs.		Tinned Vegetables lbs. ozs.		Bottled Goods lbs. ozs.		Tinned Fish lbs. ozs.		Packeted Goods lbs. ozs.	
634	0	306	9	12	0	73	0	7	8	82	0

I am pleased to report that no seizures of diseased meat or other food has been necessary during the year.

Food Adulteration.

This section of the Food and Drugs Act, 1938 is operated by the County Council and I am much obliged to Mr. C. O. Perry, Chief Weights and Measures Inspector for the following details of samples taken during the year ended 31st March, 1958, within this area—

Article				No. taken	
				Genuine	Unsatisfactory
Butter and other fats	...	...	...	1	—
Drugs	...	...	...	1	—
Milk—Channel Island	...	...	...	10	—
Milk	...	...	...	24	—
Sausage, Meat and Fish Products	...	...	...	2	—
Spirits	...	...	...	2	—
Other Foods	...	...	...	4	—
				—	—
				44	—
				—	—

The 10 Channel Island Milk samples proved to contain an average of 4.52 per cent. Fat and 9.05 per cent. non-fatty solids and the 24 milk samples an average of 3.70 per cent. Fat and 8.70 per cent. non-fatty solids.

Milk Supplies.

Distribution of milk within the area is carried out by four Retailers in addition to one Producer/Retailer who sells Raw Tuberculin Tested (Farm Bottled) from shop premises.

Licences issued under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949—

Dealers' (Pasteurisers) Licences to use the designation "Pasteurised"	1
Dealers' Licences to use the designation "Pasteurised"	4
Supplementary Licences to use the designation "Pasteurised"	1
Supplementary Licences to use the designation "Sterilised"	1

Licences issued under the Milk (Special Designation) (Raw Milk) Regulations, 1949—

Dealers' Licences to use the designation "Tuberculin Tested"	4
Supplementary Licences to use the designation "Tuberculin Tested"	1

Forty-four samples of milk were taken from Purveyors retailing in the area. The Public Analysts' results are as follows—

		Types of Milk				
		Pasteurised	Pasteurised T.T.	T.T.	Ordinary	Total
Number of samples		17	17	10	—	44
Phosphatase	Satis.	17	17	—	—	34
Test	Unsatis.	—	—	—	—	—
Methylene	Satis.	17	17	1	—	35
Blue Test	Unsatis.	—	—	—	—	—
Test for	Satis.	—	—	5	—	5
Myco T.B.	Unsatis.	—	—	—	—	—
Test for	Satis.	—	—	9	—	9
Brucella Abortus	Unsatis.	—	—	—	—	—

Ice Cream.

No ice cream is now manufactured in the town and there is only one van plying in the area. No action in respect of contraventions of the Heat Treatment Regulations has been necessary against any of the 34 registered retailers.

Samples of each brand of ice cream retailed in the area were submitted for analysis. All were found to comply with the required standard.

Food Premises.

Fourteen of the food premises visited during the year were found to be in need of attention in addition to two Restaurants and two food vehicles, and appropriate action was taken under the Food Hygiene Regs. 1955.

Other Public Health Measures

Rodent Control and Pests.

The Prevention of Damage by Pests Act, 1949, as regards the Local Authority is carried out by one full-time operative.

237 complaints were received from private houses and were duly visited and treated. This involved the laying of 3835 Poison Baits. The poison used on these occasions is Warfarin, an anti-coagulant which, whilst being a most satisfactory poison for rodents is comparatively harmless to humans and domestic animals.

The Councils sewers continued to be treated in accordance with the Ministrys recommendations and for the first time an anti-mould additive known as para-nitrophenol was used. This prevented the baits from becoming unattractive to the rodents and the prolonged baiting resulted in a marked reduction of 'takes' during the second maintenance treatment. The largest number of man-holes found to be infested at any one time was eight.

Other pests dealt with included an infestation of flies in the roof spaces of houses in the Wilsom Road area, various wasp nests throughout the town and an unusually heavy accumulation of *Balaustium musoreum* (red spider mite) on the roof of the Treatment Block at Lord Mayor Treloar Hospital, which were gaining access to the wards.

Housing.

Re housing from sub-standard Houses—

The number of properties scheduled for action under the scheme for the Clearance of Sub-Standard Accommodation is now 95, and when re-housing is possible the future of these properties will be considered and the tenants offered alternative accommodation.

Action taken.

(a) Houses demolished.

As a result of formal or informal procedure under Sect. II, Housing Act, 1936.

Nil

(b) Unfit houses closed.

Under Sect. II, Housing Act, 1936

4

(c) Unfit houses made fit.	
After informal action	25
After formal action (a) Public Health Acts	Nil
(b) Housing Act, 1936	1

Number of Inspections made.

Complaints received	..	..	..	..	..	..	47
Complaints investigated	..	..	..	..	..	..	47
Complaints justified	..	..	..	..	..	..	43
Housing Defects—Public Health and Housing Acts							
Inspections and revisits	..	..	..	..	..	..	233
Old Drains tested	..	..	..	..	..	..	2
Tents, vans and sheds	..	..	..	..	..	..	75
Factories (mechanical power)	..	..	..	..	..	..	9
Factories (non-mechanical power)	..	..	..	..	..	..	2
Butchers' Shops	..	..	..	..	..	..	21
Fishmongers	..	..	..	..	..	..	6
Other Food Shops	..	..	..	..	..	..	33
Cafés, Restaurants, etc.	..	..	..	..	..	..	9
Bakehouses	..	..	..	..	..	..	3
Ice Cream Premises	..	..	..	..	..	..	4
Dairies	..	..	..	..	..	..	22
Bacteriological Milk Samples taken	..	..	..	..	..	..	31
Piggeries (and other animals not domestic)	..	..	..	..	..	..	5
Miscellaneous visits	..	..	..	..	..	..	46
Drainage inspections	..	..	..	..	..	..	40
Disinfestation	..	..	..	..	..	..	55
Water Supply	..	..	..	..	..	..	4
Public Houses	..	..	..	..	..	..	5
Schools	..	..	..	..	..	..	7
Smoke Abatement	..	..	..	..	..	..	26
Infectious Diseases	..	..	..	..	..	..	50
Food Vehicles	..	..	..	..	..	..	2
Interviews at office (Housing Management and Public Health)	..						2154

Defects found and Remedied.

	Preliminary notices served	Statutory notices served	Work completed by owner	Work done in default by Council
1. Blocked drains (soil)	3	—	3	—
2. Repairs to drains (soil)	2	—	2	—
3. New W.Cs. provided	—	—	—	—
4. Defective pans and traps of W.Cs.	3	—	3	—
5. Defective W.C. cisterns or flush pipes	11	1	10	—
6. Defective waste pipes (Bath, lav. and sinks)	3	2	4	—
7. Defective sink waste channels ..	1	1	1	—
8. Absence of sinks	—	—	—	—
9. Defective sinks	4	1	5	—
10. Defective eaves, gutters or R.W. pipes	9	1	8	—
11. Defective house gullies	—	—	—	—
12. Stagnant water	—	—	—	—
13. Offensive accumulations	6	—	6	—
14. Animals, poultry, etc.	4	—	4	—
15. Verminous premises	—	—	—	—
16. Insufficient or defective water supply	2	—	2	—
17. Defective dustbins	3	—	3	—
18. Absence of dustbin	1	—	1	—
19. Defective yard paving	7	1	6	—
20. W.Cs. requiring cleansing	—	—	—	—
21. Defective chimney flues	9	—	8	—
22. Damp walls due to internal defects	8	—	7	—
23. Damp walls due to lack of or defective D.P.C.	12	—	8	—
24. Defective fireplaces or stoves ..	3	1	3	—
25. Defective coppers	1	—	1	—
26. Defective ventilation	4	—	2	—
27. Defective sub-floor ventilation ..	—	—	—	—
28. Defective windows and doors ..	27	4	22	—
29. Defective roofs	9	3	9	—
30. Defective brickwork or pointing ..	10	—	8	—
31. Defective floors	10	4	8	—
32. Defective plastering	16	3	13	—
33. Defective stairs	2	—	—	—
34. Absence of handrails to stairs ..	1	—	1	—
35. Absence of or insufficient Food Stor- age	5	—	4	—
36. Other matters	6	—	6	—

Factories Acts, 1937 and 1948

Part I

(i) Inspections, etc.					
Number on Register	...	...	...	...	49
Inspections	...	...	...	...	11
Notices	...	...	...	...	1
(ii) Defects found—					
Want of Cleanliness	...	...	...	...	1
Sanitary Conveniences					
(a) Insufficient	...	...	...	...	—
(b) Unsuitable or defective	4
(c) Not separate for sexes	—

Part VIII

Outworkers	Nil
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Statutory Notices

Number of Statutory Notices issued for abatement or abolition of nuisances.

	Served	Complied with
Public Health Act, 1936, Section 93	—	—
Housing Act, 1936, Section 9	3	1
Food and Drugs Act, 1938/1955	—	—
	3	1

Legal Proceedings

No legal proceedings were taken during the year.

Disinfections

Steam disinfection of bedding, clothing, etc., may still be carried out, by arrangement, at the Aldershot or Farnham Hospitals.

Number of premises disinfected after infectious disease in the Urban District. 1

Housing Management—

The following is a table showing the number of applicants on the active Waiting List but does not include the families living in Slum Clearance property who have not made application to be rehoused. These number 53.

TYPE OF APPLICANT	CONDITIONS IN HOUSE									
	SUB-TENANTS				TENANTS					
	Overcrowded		Sub-Standard	Fair Condition	Sub-Standard		Slum Clearance		Fair Condition	
	Fair Con.	Sub-Std.				O/C		O/C		O/C
No MEDICAL Points										
Aged Persons ..	2	—	2	8	19	—	6	—	—	10
Others	21	9	12	28	35	14	12	3	31	6
MEDICAL Points										
Aged Persons ..	—	—	3	1	7	—	—	4	4	—
Others	1	—	2	1	2	—	1	—	3	—

No new council accommodation became available for letting during 1957 but 20 vacancies occurred and after arranging six exchanges from other council property 20 applicants on the Waiting List were rehoused, these comprised 7 in 3 Bedroom Houses, 7 in 2 Bedroom Flats, 1 in 1 Bedroom Flat and 5 in Aged Persons Accommodation.

In addition to this movement one exchange was permitted from private property in Alton and one from a Council Flat at Henley.

Thirteen new houses were constructed by private enterprise during the year.

*C. Mills & Co., Printers,
Alton, Hampshire*